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UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

GLENN JOHNSON

21 CV 10535

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

AMENDED
COMPLAINT
(Prisoner)

CITY OF NEW YORK, P.O. JAYLENE RODRIGUEZ #12300,
NYPD 41ST PRECINCT. SGT. JOSE TAX 42474, SGT. 41ST PRECINCT.
P.O. PRECINCT JOSE ROSA TAX 42474, P.O. JOHNDOR NYPD 41ST
P.O. JOHNDOR NYPD PRECINCT.

Do you want a jury trial?

☒ Yes ☐ No

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

☒ Violation of my federal constitutional rights

☒ Other: FALSE ARREST, FALSE IMPRISONMENT

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary.

<u>Glenn</u>		<u>JOHNSON</u>
First Name	Middle Initial	Last Name

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

830 BOYNTON AVE. APT #196 BRONX NEW YORK 10473

Current Place of Detention

Home ADDRESS

Institutional Address

<u>BRONX</u>	<u>NEW YORK</u>	<u>10473</u>
County, City	State	Zip Code

III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

- ☒ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☐ Convicted and sentenced prisoner
- ☐ Other: _____

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1: P.O. Taylene RODRIGUEZ # 12800
 First Name Last Name Shield #
POLICE OFFICER
 Current Job Title (or other identifying information)
1035 LONGWOOD AVENUE (41) PRECINCT
 Current Work Address
BRONX NEWYORK 10459
 County, City State Zip Code

Defendant 2: SGT. JOSE ROSA TAX # 92474
 First Name Last Name Shield #
SERGEANT DESK OFFICER
 Current Job Title (or other identifying information)
1035 LONGWOOD AVENUE (41) PRECINCT
 Current Work Address
BRONX NEWYORK 10459
 County, City State Zip Code

Defendant 3: SGT. DESK OFFICER
 First Name Last Name Shield #
SERGEANT
 Current Job Title (or other identifying information)
1035 LONGWOOD AVENUE (41) PRECINCT
 Current Work Address
BRONX NEWYORK 10459
 County, City State Zip Code

Defendant 4: P.O. JOHN DOE
 First Name Last Name Shield #
POLICE OFFICER
 Current Job Title (or other identifying information)
1035 LONGWOOD AVENUE (41) PRECINCT
 Current Work Address
BRONX NEWYORK 10459
 County, City State Zip Code

DEFENDANT 5: P.O. JOHN DOE
POLICE OFFICER
1035 LONGWOOD AVENUE (41) PRECINCT
BRONX, NEWYORK 10459

V. STATEMENT OF CLAIM

Place(s) of occurrence: LAFAYETTE AVENUE AND BARRY STREET

Date(s) of occurrence: OCTOBER 8TH, 2020

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

ON OR BEFORE 10/8/20 AT THE HUNT'S POINT SECTION OF THE BRONX BETWEEN LAFAYETTE AVENUE AND BARRY STREET ABOUT 9:09 PM IN THE EVENING I WAS DRIVING A 2010 GMC TERRAIN DOWN LAFAYETTE AVENUE AND BARRY STREET WHEN I STOPPED AT A STOP SIGN A FEMALE WALKS UP TO MY VEHICLE ASKED ME DO I WANT A DATE I CHARGE \$ 25.00 DOLLARS. I TOLD HER NO I AM OK SO WHEN I DROVE OFF THREE NYPD PATROL CARS BLOCKED MY VEHICLE IN THE FOUR TOLL DOGS POLICE OFFICERS THAN RUN'S UP TO MY VEHICLE PULL'S ME OUT OF MY VEHICLE AND PUSHES ME UP AGAINST MY VEHICLE TWISTS MY ARM AND PUT'S ME IN TIGHTED HANDCUFFS THE OFFICER TOLD ME I WAS UNDER ARREST. THE OFFICERS THAN TRANSPORTED ME TO THE (41) PRECINCT WHERE I SAT IN THE PATROL CAR FOR ONE HOUR IN TIGHTED HANDCUFFS I TOLD THE OFFICER TO LOOSEN THE HANDCUFFS I WAS HAVING PAIN IN BOTH WRISTS THE OFFICER REFUSED TO LOOSEN THE HANDCUFFS THE FEMALE THAT WALKED UP TO MY VEHICLE AND ASKED ME DO I WANT A DATE WAS A UNDERCOVER COP. I WAS CHARGE WITH PL. 230.04 PATRONIZE PROSTITUTION 3RD DEGREE (A) MISDEMEANOR AND THAT CHARGE WAS DISMISSED ON FEBRUARY 3RD, 2021.

BECAUSE IT'S NO CRIME TO TALK TO A FEMALE STRANGER WHICH IS FREE SPEECH IN MY CASE I STOPPED AT A CORNER WHICH SHE DID NOT GET IN MY CAR OR OPEN MY CAR DOOR IS NO CRIME "I SAID TO HER I WAS OK" I DROVE OFF AND

WAS ARRESTED.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

EMOTIONAL DISTRESS, PAIN AND SUFFERING, MENTAL AGONY

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

COMPENSATE ME FOR THE DAMAGES IN THE AMOUNT OF \$2,000,000 DOLLARS.

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

<u>2/8/22</u>		<u>Glenn Johnson (Prose)</u>
Dated		Plaintiff's Signature
<u>Glenn</u>		<u>JOHNSON</u>
First Name	Middle Initial	Last Name
<u>880 BOYNTON AVE APT #19G</u>		
Prison Address		
<u>BRONX</u>	<u>NEW YORK</u>	<u>10473</u>
County, City	State	Zip Code

Date on which I am delivering this complaint to prison authorities for mailing: 2/8/22